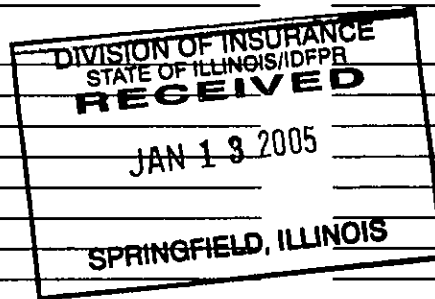


SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

3/1/05

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	7,223,455.00	-3.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No, filing will apply to all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Modification of our existing percentage and maximum credits for our optional deductibles as well as modifying our Coverage A curve factors.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American Automobile Insurance
Company

Name of Company

*Christopher Roe*Christopher P. Roe
Vice President

Official - Title

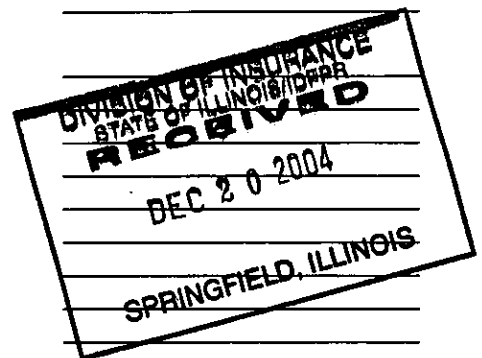
Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$2,695,728	-0.7%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.

American Economy Insurance Company
 Name of Company

David Ochs – Product Manager
 Official - Title

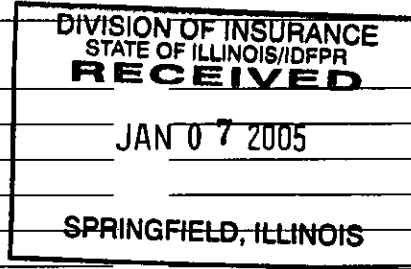
H29219D

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective September 30, 2004

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$ 131,535,697	-3.9%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		



Does filing only apply to certain territory (territories) or certain classes? No

If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory

Organization, specify organization): Gold Star Eligibility in Town Class 9 and 10: Increase

Home and Auto Discount to 16%: Introduce Impact Resistant Roof Discount

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will
result from application of new rates.

AMERICAN FAMILY MUTUAL INS. CO.

Name of Company

TOM CAIN

Senior Pricing Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	931,992.00	-0.02%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No, filing will apply to all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Modification of our existing percentage and maximum credits for our optional deductibles as well as modifying our Coverage A curve factors.

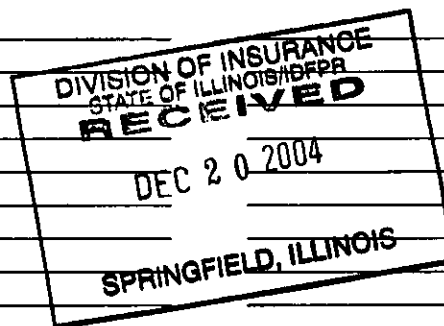
* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Christopher P. Roe
Vice PresidentOfficial - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$1,101,775	-0.8%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.

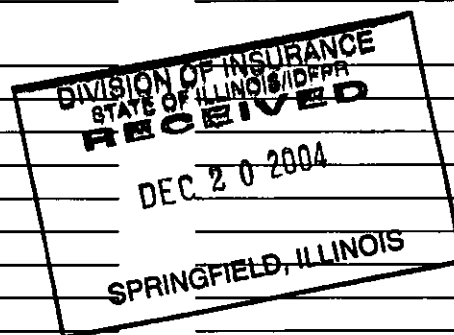
American States Insurance Company
Name of Company

David Ochs – Product Manager
Official - Title

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$1,138,437	-0.5%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

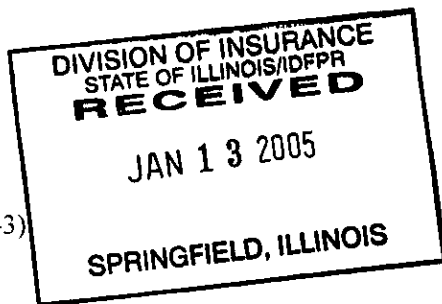
Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.

American States Preferred Insurance Company
Name of Company

David Ochs – Product Manager
Official - Title

H29219D



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	2,984,341.00	-7.6%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No, filing will apply to all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Modification of our existing percentage and maximum credits for our optional deductibles as well as modifying our Coverage A curve factors.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Associated Indemnity Corporation
Name of Company

Christopher Roe

Christopher P. Roe
Vice President

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		New Renew	2/1/05 4/1/05
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**	
1. Automobile Liability			
Private Passenger			
Commercial			
2. Automobile Physical Damage			
Private Passenger			
Commercial			
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners	3,231,042	+10%	
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other			
Line of Insurance			

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Applicable to all HO-3 policies in all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

+10% premium increase on all HO-3 policies.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



Cambridge Mutual Fire Insurance
Name of Company

Stephen A. Armstrong
Assistant Secretary
Official - Title

Form (RF-3)

SUMMARY SHEET

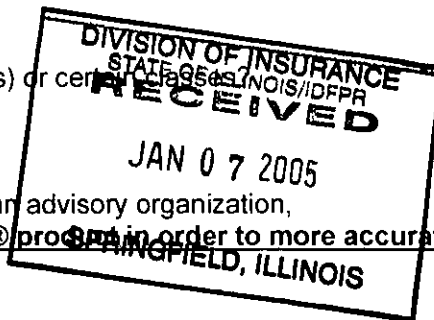
Change in Company's premium or rate level produced by rate revision effective:

New Business 1-1-05/Renewal Business 3-1-05

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage Dwelling Fire		
11. Inland Marine		
12. Homeowners	<u>\$2,332,047</u>	<u>0%</u>
13. Commercial Multi-Peril		
14. Crop/Hall		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: n/a

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting ISO's Location @ Springfield, Illinois in order to more accurately protect public protection information.



* Adjusted to reflect all prior rate changes-

** Change in Company's premium level which will result from application of new rates.

Central Mutual Insurance Company
Name of Company

(Mrs.) Petrise Meyer
Rates and Forms Analyst
Official- Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	3,629,877.00	-2.8%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

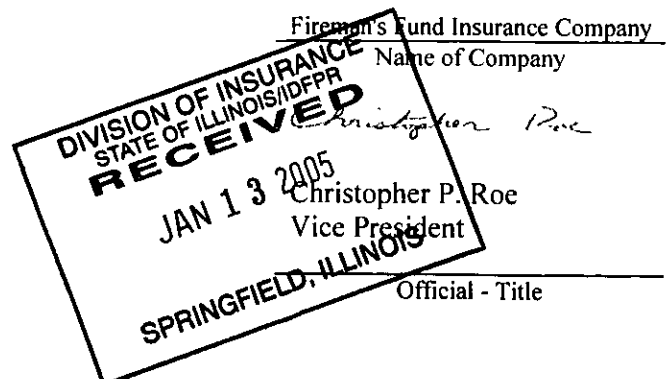
No, filing will apply to all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Modification of our existing percentage and maximum credits for our optional deductibles as well as modifying our Coverage A curve factors.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective:

02/14/05

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability		
• Private Passenger		
• Commercial		
2. Automobile Physical Damage		
• Private Passenger		
• Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	0	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other -		
(Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No, filing is applicable to all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revise HO-3, 4, 6 unity premiums, and deductible factors.Revise HO-3 deductible cap credits. Revise territory definition.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

The First Liberty Insurance Corporation
Name of Company

Katherine Kam - Actuarial Analyst
Official - Title



SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$3,844,832	-0.7%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.

First National Insurance Company of America
Name of Company

David Ochs – Product Manager
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1-1-05

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$11,704,628	+4.22
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): See Filing Letter

*Adjusted to reflect all prior rate changes.

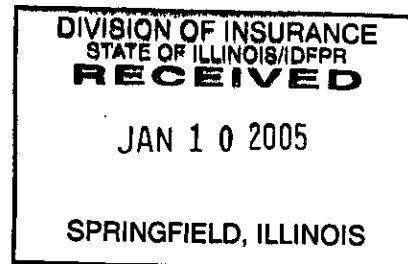
**Change in Company's premium level which will result from application of new rates.

General Casualty Company of Illinois

Name of Company

Paul H. Schulte, AVP - Personal Lines Operations

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1-1-05

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$365,831	+2.45
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): See Filing Letter

*Adjusted to reflect all prior rate changes.

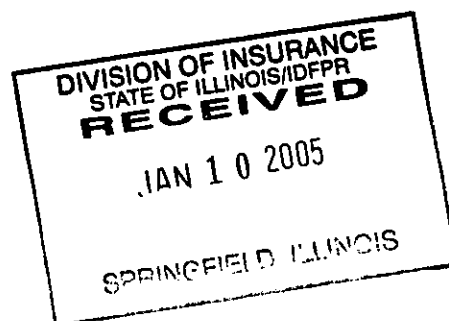
**Change in Company's premium level which will result from application of new rates.

General Casualty Company of Wisconsin

Name of Company

Paul H. Schulte, AVP - Personal Lines Operations

Official - Title

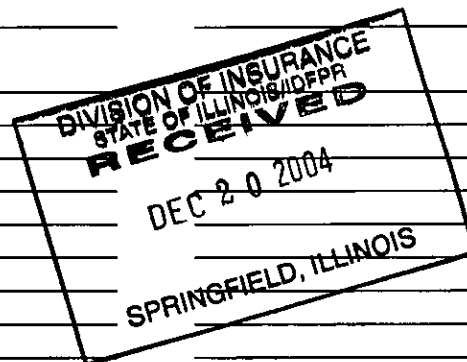


Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$10,315,013	-1.1%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.

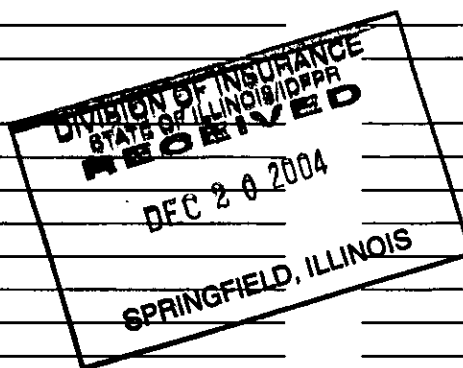
General Insurance Company of America
Name of Company

David Ochs – Product Manager
Official - Title

H29219D

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$1,170,534	-0.5%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.Insurance Company of Illinois

Name of Company

David Ochs – Product Manager

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/01/2005 New and 03/01/2005 Renewal

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$6,056,392	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Please see cover letter and filing memorandum.

*Adjusted to reflect all prior rate changes.

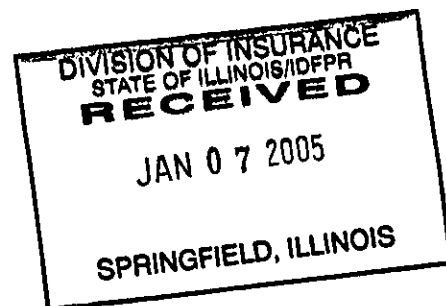
**Change in Company's premium level which will result from application of new rates.

Kemper Independence Insurance Company

Name of Company

Elizebeth Hawley, Product Analyst

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective:

02/14/05

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability		
• Private Passenger		
• Commercial		
2. Automobile Physical Damage		
• Private Passenger		
• Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	11,276,810***	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other -		
(Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No, filing is applicable to all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revise HO-3, 4, 6 unity premiums, and deductible factors.Revise HO-3 deductible cap credits. Revise territory definition.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

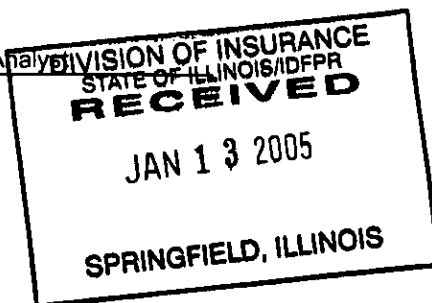
***2003 direct written premiums.

Liberty Mutual Fire Insurance Company

Name of Company

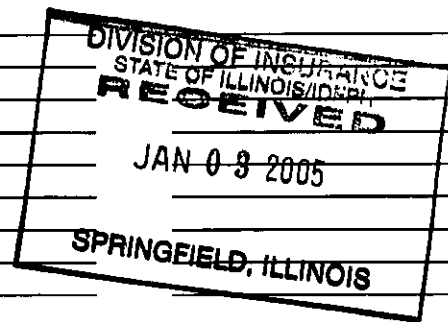
Katherine Kam - Actuarial Analyst

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective			New	2/1/05
			Renew	4/1/05
(1)	(2)	(3)		
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**		
1. Automobile Liability				
Private Passenger				
Commercial				
2. Automobile Physical Damage				
Private Passenger				
Commercial				
3. Liability Other Than Auto				
4. Burglary and Theft				
5. Glass				
6. Fidelity				
7. Surety				
8. Boiler and Machinery				
9. Fire				
10. Extended Coverage				
11. Inland Marine				
12. Homeowners	1,713,441	+10%		
13. Commercial Multi-Peril				
14. Crop Hail				
15. Other				
Line of Insurance				



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Applicable to all HO-3 policies in all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

+10% premium increase on all HO-3 policies.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Merrimack Mutual Fire Insurance
Name of Company

Stephen A. Armstrong
Assistant Secretary
Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective January 20, 2005

	(1)	(2)	(3)
	<u>Coverage</u>	<u>Annual Premium</u>	<u>Percent</u>
		<u>Volume (Illinois)</u>	<u>Change (+ or -)</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$610,735	-0.1%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.Safeco Insurance Company of America

Name of Company

David Ochs – Product Manager

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$4,959,371	-1.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.

Safeco Insurance Company of Illinois
Name of Company

David Ochs – Product Manager
Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective January 20, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$9,636,060	-1.1%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Program Revision – change from Form 35 to Form 33 with Enhanced Protection Endorsement.
Safeco Insurance Company of Indiana
 Name of Company

David Ochs – Product Manager
 Official - Title

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 12-22-2004

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Platinum Shield</u>	<u>638,265</u>	<u>+16.6</u>
<u>Line of Insurance</u>		

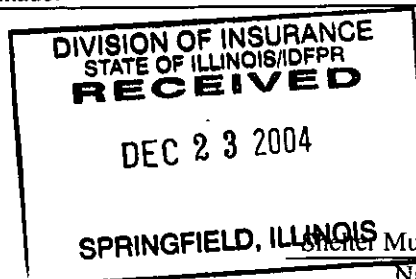
Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Base rates have been revised. Supplemental rates for Back-up Sewer or Drain have been revised. Various deductible changes are being introduced. The New Home Under Construction Discount, the Protective Devices Credit, the New Home Discount and the Improved Home Discount have been revised. The Companion Policy Discount has been revised. A Claim Free Discount and a Claim Surcharge are being introduced. The Premium Determination Rule has been revised. Editorial rule changes have also been made.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

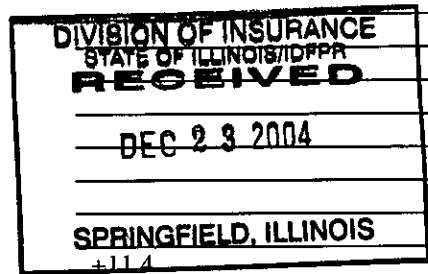


Shenker Mutual Insurance Company
 Name of Company

Brian Marcks, CPCU, Coordinator
of Insurance Department Affairs
 Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 12-22-2004

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	2,746,703	
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revising manual pages to match the new Homeowners policy. Base rates have been revised for HO Forms 3, 4 and 6. Amount of insurance relativities have been revised for Form 3. Supplemental rates for Expanded Restoration Cost and Back Up Sewer & Drain have been revised. Various deductible changes are being introduced. The New Home Under Construction Discount, the Protective Devices Credit, the New Home Discount and the Improved Home Discount have been revised. The Companion Policy Discount has been revised. A Claim Free Discount and a Claim Surcharge are being introduced. The Premium Determination Rule has been revised. Editorial rule changes have also been made.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Shelter Mutual Insurance Company
Name of Company

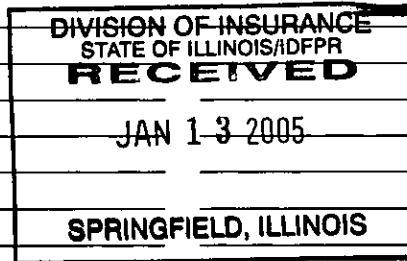
Brian Marcks, CPCU, Coordinator
of Insurance Department Affairs
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate

Revision effective 01-28-05

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$9,285,899	-1.5%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revision of Coverage A Limit Factor

* Adjusted to reflect all prior rate changes.

** Changes in Company's premium level which will result from application of new rates.

Travelers Property Casualty Insurance Company

Name of Company

David M. [Signature] Director

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/01/2005 New and 03/01/2005 Renewal

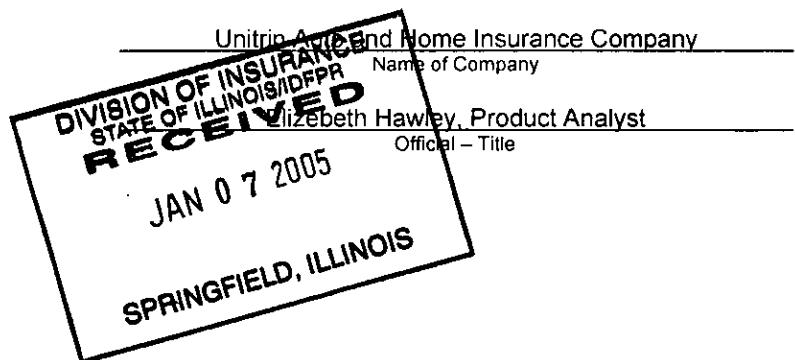
(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$1,640,930	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Please see cover letter and filing memorandum.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 02/01/2005 New and 03/01/2005 Renewal

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	\$330,626	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Please see cover letter and filing memorandum.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Unitrin Preferred Insurance Company
Name of Company

Elizebeth Hawley, Product Analyst
Official - Title



SUMMARY SHEET

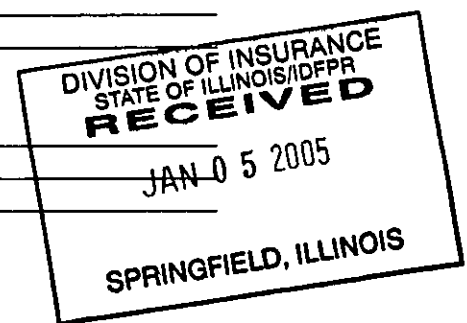
Change in Company's premium or rate level produced by rate revision
Effective 3/1/2005

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger	<u>10,425,947</u>	<u>+ 3.3%</u>
Commercial	<u> </u>	<u> </u>
2. Automobile Physical Damage		
Private Passenger	<u>8,443,458</u>	<u>- 7.2%</u>
Commercial	<u> </u>	<u> </u>
3. Liability Other Than Auto	<u>761,277</u>	<u>0.0%</u>
4. Burglary and Theft	<u> </u>	<u> </u>
5. Glass	<u> </u>	<u> </u>
6. Fidelity	<u> </u>	<u> </u>
7. Surety	<u> </u>	<u> </u>
8. Boiler and Machinery	<u> </u>	<u> </u>
9. Fire	<u> </u>	<u> </u>
10. Extended Coverage	<u> </u>	<u> </u>
11. Inland Marine	<u>802,300</u>	<u>0.0%</u>
12. Homeowners	<u>8,975,042</u>	<u>- 7.1%</u>
13. Commercial Multi-Peril	<u> </u>	<u> </u>
14. Crop Hail	<u> </u>	<u> </u>
15. Worker's Compensation	<u> </u>	<u> </u>
16. Other <u>Dwelling Fire</u>	<u>389,987</u>	<u>0.0%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?

If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization: _____)



* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

West Bend Mutual
Name of Company

G. Jones Compliance Mgr.
Official - Title